

As a below named inventor, I hereby declare that:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

WATER-BASED HEAT-RESISTANT COATING COMPOSITION AND PROCESS FOR APPLICATION THEREOF

☒ was filed on February 23, 2005 as United States Application Number or PCT International

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 (a) – (d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application for which priority is claimed.

☒ Yes ☐ No☒ Yes ☐ No☒ Yes ☐ No☐ Yes ☐ No☐ See attached list for additional prior foreign applications

Status

☐ Patented ☐ Pending ☐ Abandoned☐ Patented ☐ Pending ☐ Abandoned☐ Patented ☐ Pending ☐ Abandoned

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

23850

PATENT TRADEMARK OFFICE

Please direct all communications to the following address:

23850

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18 of the United States Code, ' 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

(See note C)

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Full name of fourth inventor (given name, family name) _____
Inventor's signature _____ Date _____
Residence _____ Citizenship _____
Post Office Address _____

Full name of fifth inventor (given name, family name) _____
Inventor's signature _____ Date _____
Residence _____ Citizenship _____
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